



# BUSINESS LICENSE COMMISSION

## COUNTY OF LOS ANGELES

374 KENNETH HAHN HALL OF ADMINISTRATION

500 WEST TEMPLE STREET

LOS ANGELES, CA 90012

(213) 974-7691

[www.board.co.la.ca.us/blc](http://www.board.co.la.ca.us/blc)



### MEMBERS

**SARA VASQUEZ**

*PRESIDENT*

**RENÉE CAMPBELL**

*VICE-PRESIDENT*

**SHAN LEE**

*SECRETARY*

**JAMES BARGER**

*COMMISSIONER*

**GENEVIEVE MORRILL**

*COMMISSIONER*

February 27, 2015

Pamela Johnston  
Pamela Johnston's Dance Studio  
17716 Sierra Highway  
Santa Clarita, CA 91351

### **HEARING ON APPLICATION FOR ANNUAL DANCE/SC BUSINESS LICENSE ID #141524**

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday, March 11, 2015 at 9:00 a.m.** in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

### **RIGHT TO REPRESENTATION / FOREIGN LANGUAGE SPEAKERS**

**You have the right to be represented at this hearing by an attorney or other individual of your choosing and at your own cost.** In the absence of a representative, you must represent yourself and the hearing will proceed as scheduled.

If you require a translator, you must arrange at your own cost to have present at the hearing either **a professional/certified interpreter or other person who is fluent in both English and your native language.** If you are unable to locate an interpreter, please contact our office and you will be provided a list of interpreting services.

Parking is available at your cost; a map is enclosed for your convenience. **Please note proceedings begin promptly at 9:00 a.m. The Business License Commission reserves the right to reschedule your hearing to a later date for failure to timely appear.**

Sincerely,

SARA VASQUEZ  
President

Lupe Duron  
Commission Staff

NOTICE TO PRINTER  
STATE LAW REQUIRES THAT THIS  
LEGAL ADVERTISEMENT SHALL BE SET  
IN TYPE NOT SMALLER THAN NONPAREIL ( 6 PT. )

CUSTOMER CODE : Z 91085

NEWSPAPER : .....NEWHALL SIGNAL

PUBLISH 3 TIMES

1<sup>ST</sup> PUBLISHING DATE:.....02/19/2015  
2<sup>ND</sup> PUBLISHING DATE:.....02/26/2015  
3<sup>RD</sup> PUBLISHING DATE:.....03/05/2015

REPRINTS ORDERED: NONE

NOTICE OF HEARING TO CONDUCT

ANNUAL DANCE /SC

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN  
MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE  
COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

ADDRESS OF PREMISES:..... 17716 SIERRA HWY  
SANTA CLARITA, CA 91351  
NAME OF APPLICANT:..... PAMELA JOHNSTONS DANCE STUDIO /  
PAMELA JOHNSTON  
DATE OF HEARING:..... 03/11/2015  
TIME OF HEARING:..... 09:00 A.M.

“ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF  
THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS  
LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING HIS REASONS THEREFOR, AND HE  
MAY APPEAR AT THE TIME AND PLACE OF THE HEARING AND BE HEARD RELATIVE THERETO”

OFFICE OF THE COMMISSION:

BUSINESS LICENSE COMMISSION  
500 W. TEMPLE STREET, RM 374  
LOS ANGELES, CA 90012

RETURN TO:

LOS ANGELES COUNTY TAX COLLECTOR  
BUSINESS LICENSE SECTION  
225 N. HILL STREET RM. 109  
LOS ANGELES, CA 90012



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL  
SUMMARY SHEET**

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINESS: 17716 SIERRA HWY, SANTA CLARITA, CA 91351

TELEPHONE: (661) 252-0357

OWNER OF BUSINESS: PAMELA JOHNSTON

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: PAMELA JOHNSTONS DANCE STUDIO

MAILING ADDRESS: 17716 SIERRA HWY, SANTA CLARITA, CA 91351

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

	<u>APPROVED</u>	<u>DATE</u>	<u>SIGNATURE</u>
<input type="checkbox"/> 1. Animal Care & Control			
<input type="checkbox"/> 2. Risk Management			
<input checked="" type="checkbox"/> 3. Building & Safety	YES	07/18/14	tchen
<input checked="" type="checkbox"/> 4. Fire Department	YES	02/06/15	tchen
<input type="checkbox"/> 5. Public Health			
<input checked="" type="checkbox"/> 6. Treasurer & Tax Collector	YES	08/21/14	tchen
<input checked="" type="checkbox"/> 7. Business License Commission			
<input type="checkbox"/> 8. Sheriff Department			
<input checked="" type="checkbox"/> 9. Regional Planning Commission	YES	07/17/14	tchen
<input type="checkbox"/> 10. Weights and Measures			
<input checked="" type="checkbox"/> 11. Publishing	YES	02/19/15	tchen
<input type="checkbox"/> 12. Public Works - EPD			
<input checked="" type="checkbox"/> 13. Sheriff Fingerprint	YES	07/22/14	tchen

Conditions:



Los Angeles County Treasurer and Tax Collector  
Application for Business License



Please note: Business License fees are NOT refundable

Fee: \$ 1,708.00

ID # 141524

BUSINESS INFORMATION

Type of Business: <u>Dance Studio</u>	Address of Business: <u>17716 Sierra Hwy S.C. 91359</u>	
	Business Telephone: <u>661 2520357</u>	
DBA (Business Name): <u>Pamela Johnston Dance Studio</u>	Mailing Address: <u>James S. Business</u>	
Sellers Permit # (State Board of Equalization):		
Business Ownership Structure: Single Owner <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> If LLC or Corporation, the information below is required:		
Date of Incorporation:	Incorporated in the State of:	
Exact Corporate Name:		
Names of Officers	Addresses	Titles

APPLICANT INFORMATION

Applicant's Full Name: <u>Pamela Johnston</u>		
Home Address:		
Home Telephone:	Cell Phone:	Email address:
Social Security #:	Date of Birth:	Place of Birth: <u>La Com</u>
Driver's License or State ID#:		Expiration Date:
Male <input type="checkbox"/> Female <input checked="" type="checkbox"/>	Height:	Weight:
	Hair Color:	Eye Color:

The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the license applied for, I agree to submit any additional information that may be required, to conduct all phases of this business license in accordance with regulations established for such business and to maintain all trucks and/or equipment that may be used in connection therewith in conformance with all applicable laws, ordinances and regulations.

Date: July 14 2014

Applicant's Signature: Pamela Johnston

Application taken by: UG

Date: 7-14-14

**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS:ANNUAL DANCE /SC

ADDRESS OF BUSINESS:17716 SIERRA HWY, SANTA CLARITA, CA 91351

TELEPHONE:(661) 252-0357

OWNER OF BUSINESS:PAMELA JOHNSTON

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME:PAMELA JOHNSTONS DANCE STUDIO

MAILING ADDRESS:17716 SIERRA HWY, SANTA CLARITA, CA 91351

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR NEW LICENSE

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**BUILDING & SAFETY  
SANTA CLARITA**

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: I recommend approval.

SIGNATURE: *D. Hamrick*

DEANNA HAMRICK

DATE: 7/18/14

BASIC LICENSE NO. 8298

DATE 07/15/14

IDENTIFICATION NUMBER 141524

Feb-06-2015 12:11pm From=LACOFD FIRE MARSHAL  
02/03/2015 11:40 BR12985044  
02/03/2015 11:40 BR12985044

3238804055

T-271 P.009/011 F-052  
#2002 P.001/004

Jul-22-2014 04:14pm From=LACOFD FIRE MARSHAL

3238804055

T-081 P.004/008 F-067

**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 100, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

107

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINESS: 17716 SIERRA HWY, SANTA CLARITA, CA 91351

TELEPHONE: (661) 252-0357

OWNER OF BUSINESS: PAMELA JOHNSTON

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: PAMELA JOHNSTON'S DANCE STUDIO

MAILING ADDRESS: 17716 SIERRA HWY, SANTA CLARITA, CA 91351

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

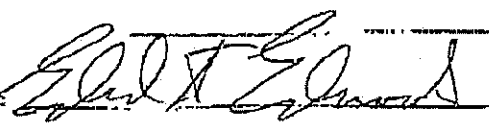
THIS IS AN APPLICATION FOR NEW LICENSE

**FIRE DEPARTMENT  
LA COUNTY**

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: \_\_\_\_\_

SIGNATURE: 

DATE: 2/5/15

BASIC LICENSE NO. 6298

DATE 07/15/14

IDENTIFICATION NUMBER 141524

**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINESS: 17716 SIERRA HWY, SANTA CLARITA, CA 91351

TELEPHONE: (661) 252-0357

OWNER OF BUSINESS: PAMELA JOHNSTON

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: PAMELA JOHNSTONS DANCE STUDIO

MAILING ADDRESS: 17716 SIERRA HWY, SANTA CLARITA, CA 91351

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR NEW LICENSE

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**TREASURER & TAX COLLECTOR**

**LA COUNTY**

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

8-21-14

BASIC LICENSE NO. 8298

DATE 07/15/14

IDENTIFICATION NUMBER 141524

# ZONING REFERRAL

I.D. #: 141524

TO: CITY OF SANTA CLARITA  
COMMUNITY DEVELOPMENT/PLANNING  
23920 VALENCIA BLVD., STE # 140  
SANTA CLARITA, CA 91355

FROM: TREASURER TAX COLLECTOR  
BUSINESS LICENSE SECTION  
23757 VALENCIA BLVD  
SANTA CLARITA CA 91355  
FAX (661) 945-3512

DATE: 1/13/2014

TYPE OF BUSINESS(ES) Dance

ADDRESS OF BUSINESS 17716 Sierra Hwy

CITY Santa Clarita, Ca ZIP CODE 91350

NAME OF OWNER Pamela Johnston

"DBA" Pamela Johnston's Dance Studio TEL. # 4

MAILING ADDRESS 17716 Sierra Hwy

Santa Clarita, Ca 91350

EXISTING USE YES ☒ NO ☐

USE PERMITTED IN ZONE C-C USE NOT PERMITTED IN ZONE "DENIED"  
"APPROVED"

REMARKS 4UP 07-0087



SIGNATURE OF ZONING OFFICER

1-13-14

DATE

DTC-14-071



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**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

14- 00941

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINESS: 17716 SIERRA HWY, SANTA CLARITA, CA 91351

TELEPHONE: (661) 252-0357

OWNER OF BUSINESS: PAMELA JOHNSTON

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: PAMELA JOHNSTONS DANCE STUDIO

MAILING ADDRESS: ~~17716 SIERRA HWY, SANTA CLARITA, CA 91351~~

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR NEW LICENSE

**SHERIFF FINGERPRINT**

LA COUNTY

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: \_\_\_\_\_

*Ag. Review*

SIGNATURE: \_\_\_\_\_ *53667*

DATE: 7/21/14

BASIC LICENSE NO. 8298

DATE 07/15/14

IDENTIFICATION NUMBER 141524

*Sealed NC Terry 7/21*